

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 15, 2008 8:00 am
Secretary of State

08-15-2008 90001 041 ****61.25

DOCUMENT # 764874

1. Entity Name

THE GROVE CONDOMINIUM, SECTION ONE,
ASSOCIATION, INC.



Principal Place of Business

200 SUNSHINE BLVD.
FT PIERCE FL 34982-3901

Mailing Address

200 SUNSHINE BLVD.
FT PIERCE FL 34982-3901

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E037 (4/08)

4. FEI Number

59-2224541

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BIZZARRO, RALPH
5856 SUMMERFIELD CT.
FT. PIERCE FL 34982

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Ralph J. Bizzarro
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8-5-08

**FILE NOW: FEE IS \$61.25
Due By September 3, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE VPD ☒ Delete
NAME JONES, JOSEPH
STREET ADDRESS 5842 HONEYBELL CT
CITY-ST-ZIP FORT PIERCE FL 34982

TITLE PD ☐ Delete
NAME BIZZARRO, RALPH
STREET ADDRESS 5856 SUMMERFIELD CT.
CITY-ST-ZIP FORT PIERCE FL 34982

TITLE VPD ☒ Delete
NAME ROMAN, HELEN
STREET ADDRESS 5843 HONEYBELL CT
CITY-ST-ZIP FORT PIERCE FL 34982

TITLE T ☐ Delete
NAME GUGLIANO, LOUIS
STREET ADDRESS 5834 HONEBELL CT
CITY-ST-ZIP FORT PIERCE FL 34982

TITLE VPD ☐ Delete
NAME FELICIA, JOSEPH
STREET ADDRESS 5841 DREAM COURT
CITY-ST-ZIP FORT PIERCE FL 34982

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD ☐ Change ☒ Addition
NAME Joseph Weismantel
STREET ADDRESS 5824 Summerfield Ct
CITY-ST-ZIP Fort Pierce, FL 34982

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ralph J. Bizzarro

8/11/08

772-465-12265